



KEY/CARD ACCESS ISSUE AND RETURN

NORTH DAKOTA HIGHWAY PATROL

SFN 52180 (9/05)

KEY/CARD/KEYTAG ISSUE

Department	Door Location or Access Level	
Department Head		
Name of Employee	Work Phone Number	
Access Device Requested (Check all that Apply)	Employee Signature (Responsible for Key/Card/Keytag)	
Metal Key Number _____	Issued By	Date Issued
Card Number _____		
Keytag Number _____		
	Approved By	Date Approved

REPLACEMENT KEY/CARD/KEYTAG

(The cost to replace a key is \$5.00, card is \$3.00, and keytag is \$5.15)

Date Returned	Returned To
Access Device Replaced (Check all that Apply)	Employee Charged
Metal Key Number _____	Payment Received
Card Number _____	
Keytag Number _____	
	Amount _____
	Date _____
	By _____

RESTRICTED HOURS/DOORS - CARDS AND KEYTAGS ONLY

NOTE: All card holders will be given 24/7 access to exterior doors of the building they work in unless specified otherwise.

Authorized Hours	Authorized Days
Authorized Doors	

Remarks
